

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: <u>1-23-04</u>		2 Serial/Patent # <u>09455904</u>	
-----------------------------------	--	-----------------------------------	--

3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing			\$
Amendment			\$
<input checked="" type="checkbox"/> Extension of Time	# 9	11-24-03	\$ 950.00
Notice of Appeal/Appeal			\$
Petition			\$
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance			\$
Assignment			\$
Other			\$

	7 TOTAL AMOUNT OF REFUND
	\$ 950.00

10 REASON:	8 TO BE REFUNDED BY:							
Overpayment	<input type="checkbox"/> Treasury Check							
Duplicate Payment	<input checked="" type="checkbox"/> Credit Deposit A/C #:							
<input checked="" type="checkbox"/> No Fee Due (Explanation):	9 <table border="1" style="display: inline-table; text-align: center;"> <tr> <td>0</td><td>3</td><td>--</td><td>1</td><td>5</td><td>5</td><td>0</td> </tr> </table>	0	3	--	1	5	5	0
0	3	--	1	5	5	0		

EOI was not filed within the maximum extendable timeframe.

11 REFUND REQUESTED BY:	
TYPED/PRINTED NAME: <u>Liana Chase</u>	TITLE: <u>Paralegal</u>
SIGNATURE: <u>Liana Chase</u>	PHONE: <u>306-0482</u>
OFFICE: <u>Dir. of Petitions</u>	
***** THIS SPACE RESERVED FOR FINANCE USE ONLY *****	
APPROVED: <u>[Signature]</u>	DATE: <u>2/3/04</u>

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**